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PAGE 1/4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Wholesale & Specialty Insurance Association (WSIA) PAC 4131 N Mulberry Drive ADDRESS (number and street) Suite 200 (Check if address is changed) Kansas City 64116 MO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS greta@wsia.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.wsia.org (Check if address is changed) DATE 2017 C00417634 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Kelley, Brady, , , Type or Print Name of Treasurer Kelley, Brady, , , [Electronically Filed] 80 15 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

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